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Bib Data Sheet

CONFIRMATION NO. 6010

SERIAL NUMBER 09/848,614	FILING DATE 05/03/2001 RULE	CLASS 356	GROUP ART UNIT 2877	ATTORNEY DOCKET NO. API-001-3P
APPLICANTS Thomas W. Hagler, Grass Valley, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/105,279 06/26/1998 PAT 6,271,917 AND IS A CON OF PCT/US99/14446 06/25/1999 AND CLAIMS BENEFIT OF 60/202,371 05/04/2000				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/27/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY CA	SHEETS DRAWING 19	TOTAL CLAIMS 3
INDEPENDENT CLAIMS 3				
ADDRESS T Lester Wallace Patent Attorney 7041 Koll Center Parkway Suite 280 Pleasanton, CA 94566				
TITLE Method and apparatus for radiation analysis and encoder				
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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APPLICANTS Thomas W. Hagler, Grass Valley, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/105,279 06/26/1998 PAT 6,271,917 <i>356/2-7102</i> AND A CON OF PCT/US99/14446 06/25/1999 AND CLAIMS BENEFIT OF 60/202,371 05/04/2000				
** FOREIGN APPLICATIONS ***** <i>356/ver</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 06/27/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> Initials		STATE OR COUNTRY CA	SHEETS DRAWING 19	TOTAL CLAIMS 3
INDEPENDENT CLAIMS 3				
ADDRESS SKJERVEN MORRILL MACPHERSON LLP 3 Embarcadero Center, Suite 2800 San Francisco ,CA 94111				
TITLE Method and apparatus for radiation analysis and encoder				
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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** CONTINUING DATA ***** This application is a CIP of 09/105,279 06/26/1998 PAT 6,271,917 and is a CON of PCT/US99/14446 06/25/1999 and claims benefit of 60/202,371 05/04/2000 <i>2/8 9/1/04</i> <i>2/8 none 9/1/04</i>					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/27/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a- d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>allowance</i> Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 19	TOTAL CLAIMS 3	INDEPENDENT CLAIMS 3
ADDRESS 27869					
TITLE Method and apparatus for radiation analysis and encoder					
FILING FEE RECEIVED 420	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		